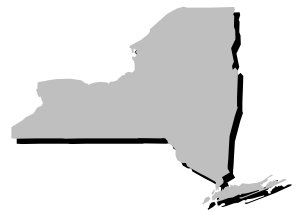




NEW YORK



NEW YORK STATE CANCER REGISTRY

Year Funded	Type of Program	Affiliation	Compliance with Public Law 102-515: Legislation and Regulations*	
			Authorizing legislation for a statewide registry: Yes	Regulations in place for data reporting, confidentiality, and use: All
1995	Enhancement	State Health Department		

*Source: NPCR Legislative Database, January 2001.

Cancer Burden

Cancer is a devastating disease. According to the American Cancer Society, in 2001 an estimated 553,400 Americans will die of cancer, and approximately 1.3 million new cancer cases will be diagnosed. These estimates do not include in situ (preinvasive) cancer of any site except urinary bladder or approximately 1 million cases of nonmelanoma skin cancer to be diagnosed this year. In New York, an estimated 83,200 new cancer cases will be diagnosed, and approximately 36,300 will die of this disease in 2001. New York ranks 29th highest overall in cancer mortality rates among the 50 states and Washington, D.C.*

The NPCR

Cancer surveillance involves the systematic collection, analysis, and use of cancer data. Information derived through surveillance is critical for directing effective cancer prevention and control programs. The Centers for Disease Control and Prevention's **National Program of Cancer Registries (NPCR)**, authorized by Congress in 1992 through the Cancer Registries Amendment Act (Public Law 102-515), serves as the foundation of a national, comprehensive cancer control strategy. Statewide cancer registries provide critical data to help identify and monitor trends in cancer incidence and mortality over time; guide cancer control planning and evaluation; help

allocate health resources; and advance clinical, epidemiologic, and health services research.

Through the NPCR, CDC supports registries in 45 states, the District of Columbia, and three territories, representing 96% of the U.S. population.[†] Forty-five programs receive support to enhance existing registries; these have on-going cancer data-collection activities, policies and procedures for central registry operations in place, and core staff employed. Four programs receive support to plan and develop new registries; they are typically involved in laying the necessary groundwork for establishing a central, population-based registry.

With fiscal year 2001 appropriations of approximately \$36 million, CDC continues to support and enhance state cancer registries, and promotes appropriate uses of data. The CDC will also develop special research projects, such as studies of patterns of cancer care in specific populations and assessments of data for integration with geographic information systems.

State Highlights

- The New York State Cancer Registry (NYSCR) was certified by the North American Association of Central Cancer Registries for completeness, timeliness, and quality of its 1997 data.

- The NYSCR is one of 11 registries participating in a special NPCR-supported childhood cancer project to design, implement, and evaluate a method to use data from a state population-based central registry to compute expected numbers of incident cancer cases in children. The registry will evaluate completeness of its data and of other existing pediatric cancer databases, such as the Children's Oncology Group, by performing data linkage. The NYSCR is also one of two states doing case follow-up studies to ascertain efficiency of passive follow-up methods.
- In 1998, the registry undertook a long-term project, the Cancer Surveillance Improvement Initiative, to conduct surveillance of cancer and cancer risk factors at the local level throughout the state. Data from the registry, in conjunction with state-of-the-art mapping techniques, are used to produce county and ZIP code-level maps of cancer incidence for use in surveillance as well as for program planning. Examination of cancer risk factors and maps showing the distribution of risk factors throughout the state will follow. Maps are available on the NY Registry Web site.

Continued

*Source: CDC's National Center for Health Statistics, vital statistics data, underlying cause of death, 1993-1997.

[†]A map of the participating NPCR programs can be found at <http://www.cdc.gov/cancer/npcr/statecon.htm>.

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- In 1978, 7,000 residents of the Love Canal area of Niagara Falls were identified as having been exposed to hazardous chemicals that migrated from the landfill. The cohort of exposed residents and their children continue to be followed to document adverse health outcomes. The cohort is regularly matched against the registry to assess their cancer experience.
- Staff of the NYSCR work closely with the Center for Environmental Health of the New York State Department of Health in the investigation of high-risk cohorts. One example is an ongoing etiologic study of the relationship between pesticide exposure and the cancer experience of women living on farms in New York.
- The Agency for Toxic Substances and Disease Registry (ATSDR) is currently sponsoring a study of childhood brain cancer in four states, including New York. The study is examining the relationship between parental exposures and early childhood environmental factors in the etiology of childhood brain tumors.
- The National Cancer Institute (NCI) is sponsoring a study of cancer risk in the AIDS population. The NYSCR data were matched against the New York State AIDS Registry data to evaluate cancer risk. To date, NCI has prepared three manuscripts on results of the match: cancer in pediatric AIDS cases; human papillomavirus-associated malignancies; and T-cell non-Hodgkin's lymphoma in AIDS cases.

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